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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/541,596	04/25/2006	Bradley Paul Morgan	10444.0090-00000	2514	

TITLE OF INVENTION: COMPOUNDS, COMPOSITIONS, AND METHODS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE		
nonprovisional	NO	\$1440	\$300	\$0	\$1740	03/21/2008		
EXAMINER		ART UNIT	CLASS-SUBCLASS					
CHANDRAKUMAR, NIZAL S 1625		1625	546-194000					
I. Change of correspondence address or indication of "Fee Address" (37 FR 1,531). Change of correspondence address (or Change of Correspondence Address form PTO/S81/22) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/S81/47, Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name with per printed.					
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Links an assignce is identified below, no assigned task will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CER 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Cytokinetics, Inc. South San Francisco, CA Please check the appropriate assignce category or categories (will not be printed on the patent): Individual Cytoporation or other private group entity Government								
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